

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED

2013 JUN 12 AM 8:15

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5 FEC MAIL CENTER

WISCONSIN RIGHT TO LIFE POLITICAL  
ACTION COMMITTEE

ADDRESS (number and street)

10625 W NORTH AVE

LOWER LEVEL

☐ Check if different  
than previously  
reported. (ACC)

MILWAUKEE WI 53226

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00173278

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☒ July 15 6 MOS  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

MEM / DDD / YYYY

in the  
State of

MEM / DDD / YYYY

(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MEM / DDD / YYYY

in the  
State of

MEM / DDD / YYYY

5. Covering Period

01 / 01 / 2013

through

06 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

RICHARD R. FOX JR.

Signature of Treasurer

X [Signature]

Date

07 / 03 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WI RIGHT TO LIFE P.A.C. # C00173278

Report Covering the Period:

From:

01 / 01 / 2013

To:

06 / 30 / 2013

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand  
January 1,

2013

109.66

- (b) Cash on Hand at  
Beginning of Reporting Period.....

109.66

- (c) Total Receipts (from Line 19).....

630.00

630.00

- (d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B).....

739.66

739.66

7. Total Disbursements (from Line 31).....

1568.59

1568.59

8. Cash on Hand at Close of  
Reporting Period 6/30/13  
(subtract Line 7 from Line 6(d)).....

1530.7

1530.7

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D).....

0.00

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D).....

0.00



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

WI. RIGHT TO LIFE P.A.C. # C00173278

Report Covering the Period:

From:

MEMBER / DEED / YEAR  
01 / 01 / 2013

To:

MEMBER / DEED / YEAR  
06 / 30 / 2013

## I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

### 11. Contributions (other than loans) From:

#### (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

630.00

630.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

630.00

630.00

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

630.00

630.00

### 12. Transfers From Affiliated/Other

Party Committees.....

### 13. All Loans Received.....

### 14. Loan Repayments Received.....

### 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

### 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

### 17. Other Federal Receipts

(Dividends, Interest, etc.).....

### 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

### 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

630.00

630.00

### 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

630.00

630.00

FWI RIGHT TO LIFE P.A.C.

## DETAILED SUMMARY PAGE

### of Disbursements

C# 00173278

Page 4

FEC Form 3X (Rev. 02/2003)

## II. Disbursements

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

21. Operating Expenditures:
- (a) Allocated Federal/Non-Federal Activity (from Schedule H4)
- (i) Federal Share .....
- (ii) Non-Federal Share.....
- (b) Other Federal Operating Expenditures .....
- (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ..... ►
22. Transfers to Affiliated/Other Party Committees.....
23. Contributions to Federal Candidates/Committees and Other Political Committees.....
24. Independent Expenditures (use Schedule E) .....
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....
26. Loan Repayments Made.....
27. Loans Made.....
28. Refunds of Contributions To:
- (a) Individuals/Persons Other Than Political Committees .....
- (b) Political Party Committees .....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ►
29. Other Disbursements .....
30. Federal Election Activity (2 U.S.C. §431(20))
- (a) Allocated Federal Election Activity (from Schedule H6)
- (i) Federal Share .....
- (ii) "Levin" Share .....
- (b) Federal Election Activity Paid Entirely With Federal Funds .....
- (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... ►
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... ►

[illegible][illegible]

050555Z OCT 67

11/1/13 - 6/30/13

WI RIGHT TO LIFE P.A.C.

DETAILED SUMMARY PAGE

of Disbursements

C# 00173278

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	630.00	22,630.00
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	630.00	630.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	686.59	686.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	686.59	686.59

0095801501

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

1/1/13 - 6/30/13

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WI RIGHT TO LIFE P.A.C. #C00173278

Full Name (Last, First, Middle Initial)

A. LYONS, PATRICK

Mailing Address

2503 N. LEEFER AVE

City

WAUWATOSA

State

WI.

Zip Code

53213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

01 / 23 / 2013

Amount of Each Receipt this Period

200.00

ck # 3971

Full Name (Last, First, Middle Initial)

B. YOCKEY, JOHN

Mailing Address

995 SOUTH SILVER LAKE STREET

City

OCONOMOWOC

State

WI.

Zip Code

53066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

02 / 11 / 2013

Amount of Each Receipt this Period

400.00

cc # - 8323

Full Name (Last, First, Middle Initial)

C. WICK, ROBERT

Mailing Address

521 FUNT STREET

City

ONALASKA

State

WI.

Zip Code

54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

06 / 05 / 2013

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

630.00  
630.00

13031083601

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

11/13 - 6/30/13

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE / OF 1

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WI RIGHT TO LIFE P.A.C. #C00173278

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

ASSOCIATED BANK

Mailing Address

200 N. ADAMS STREET P.O. Box 19097

City

State

Zip Code

GREEN BAY

WI

54307

Purpose of Disbursement

PAYPAL BANK SRV CHARGE

Candidate Name

N/A

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

91.0

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

GOVERNMENT ACCOUNTABILITY BOARD (GAB)

Mailing Address

212 EAST WASHINGTON AVE 3rd FL

City

State

Zip Code

MADISON

WI

53707

Purpose of Disbursement

ANNUAL GAB FEE

Candidate Name

N/A

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

109.10

109.10

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1  
 FOR LINE 24 OF FORM 3X

1/1/13 - 6/30/13

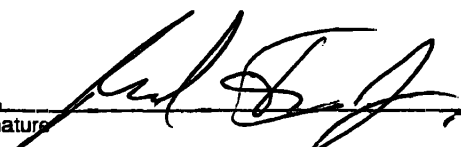
NAME OF COMMITTEE (In Full) <b>WI RIGHT TO LIFE P.A.C # C00173278</b>	FEC IDENTIFICATION NUMBER <b>C00173278</b>
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee <b>ASSOCIATED BANK - CARD MEMBER SRVS</b>		Date <b>01 / 24 / 2013</b>
Mailing Address <b>P.O. Box 790408</b>		Amount <b>267.49</b>
City <b>ST. LOUIS</b>	State Zip Code <b>MO. 63179-0408</b>	
Purpose of Expenditure <b>FACEBOOK + E-TEXTING COSTS</b>	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>THOMPSON - SUPPORT BALDWIN - OPP</b>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>267.49</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>ASCEDIA INC.</b>		Date <b>02 / 20 / 2013</b>
Mailing Address <b>161 SOUTH 1st STREET</b>		Amount <b>310.00</b>
City <b>MILWAUKEE, WI</b>	State Zip Code <b>53204</b>	
Purpose of Expenditure <b>PRORATA COST OF WEBSITE PROMOTING PRO-LIFE CANDIDATES</b>	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>ROMNEY RYAN - SUP OBAMA BIDEN - OPP THOMPSON - SUP BALDWIN - OPP</b>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>702.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>577.49</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<b>0.00</b>
(c) TOTAL Independent Expenditures .....	<b>577.49</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

x   
 Signature

Date **07 / 03 / 2013**

13031083603



# SCHEDULE D (FEC Form 3X)

## DEBTS AND OBLIGATIONS

Excluding Loans

1/1/13 - 6/30/13

(Use separate schedule(s) for each numbered line)

PAGE / OF /

FOR LINE NUMBER: (check only one)

9  
10

NAME OF COMMITTEE (In Full)

W.I. RIGHT TO LIFE P.A.C. - FEDERAL

# C.00 173278

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ASSOCIATED BANK - CARD MEMBER SERVICE

Nature of Debt (Purpose):

• FACEBOOK COSTS - \$169.65  
• E-TEXTING - \$25.00  
• ADMINISTRATIVE - \$72.84  
INTEREST COST ON CREDIT CARD - PRORATA

Mailing Address

P.O. Box 790408

City

State

Zip Code

ST. LOUIS, MO. 63179-0408

Outstanding Balance Beginning This Period

0.00

Amount Incurred This Period

267.49

Payment This Period

267.49

Outstanding Balance at Close of This Period

00.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional).....▶


2) TOTALS This Period (last page this line number only).....▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶

0.00  
0.00  
0.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <b>7/5/13</b>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<b>7/12/13</b> DATE PREPARED

(7/2013)

13031083605